Declaration and Pe

of Attorney For Utility or De English Language Declaration

?atent Application

As a below named inventor, I	hereby declare that:		
My residence, post office add	ress and citizenship are	as stated below next to my r	name.
believe I am the original, fir	st and sole inventor (if of a are listed below) of the	only one name is listed belove subject matter which is cla	w) or an original, first and imed and for which a patent
s sought on the invention end THERMAL SHIELD AND H	HERMETIC SEAL FOR	PREVENTING DETERIO	RATION OF PLASTIC
NSULATION IN OPEN ACT he specification of which is a	attached hereto unless th	ne following box is checked:	
and was amended on	<u> </u>		
PCT International Applica	ition Number		(if applicable).
and was amended on	1.1.1	e contants of the above ider	ntified specification, including
the elector of amoended by al	TV ATTICITUALITY TO A CONTROLLED		atified specification, including
I acknowledge the duty to di of Federal Regulations, §1.5	sclose information which	ch is material to patentability	as defined in Title 37, Code
foreign application(s) for pa which designated at least on identified below, by checkir any PCT international application	e country other than the	35, United States Code §119 cate, or §365(a) of any PCT United States of America, legin application for patent of the application for th	isted below. I have also be inventor's certificate, or of
claimed:			Priority Claimed
اگھر د د د		(Day/Month/Year Fil	$\overline{\underline{\text{ed}}}$ Yes No
(Number)	(Country)		
(Number)	(Country)	(Day/Month/Year Fil	ed) Yes No
(Number)	(Country)	(Day/Month/Year Fil	ed) Yes No
(Number)	cation numbers are liste	ed on a supplemental priority	sheet attached hereto.
I hereby claim the benefit upplication(s) listed below.	ınder Title 35, United St	tates Code §119(e) of <u>an</u> y U	nited States provisional
		9	
60/141,015 (Number)	(Day/Month	9 /Year Filed)	•
(Number)	(Day/Month	/Year Filed)	
(Number)	(Day/Month	/Year Filed)	•
Additional provisional			

I hereby claim the benefit under Time §365(c) of any PCT international apprinsofar as the subject matter of each or PCT international application in the §112, I acknowledge the duty to disc Code of Federal Regulations §1.56 wand the national or PCT international	of the claims of this a manner provided be information which became available.	application is not dis by the first paragraph ich is material to pat alle between the filing	sclosed in the prior United States of Title 35, United States Code entability as defined in Title 37,
	(Eiling Dot	۵)	(Status)
(Application No.)	(Filing Dat	e) (pate	ented, pending, abandoned)
(Application No.)	(Filing Dat	(pate	(Status) ented, pending, abandoned)
☐ Additional U.S. or international a hereto.	pplication numbers a	are listed on a supple	emental priority sheet attached
I hereby declare that all statements in on information and belief are believed knowledge that willful false stateme under Section 1001 of Title 18 of the jeopardize the validity of the application. The undersigned hereby authorizes the from either his foreign patent agent Patent and Trademark Office regard attorney or agent and the undersigned be taken, the U.S. attorney or agent POWER OF ATTORNEY: As a nare with the Customer Number provided Patent and Trademark Office connections.	nts and the like so me United States Code ation or any patent is the U.S. attorney or a corporate represering this application ved. In the event of a named herein will be med inventor, I herebally and the composite of the compo	ade are punishable to and that such willfusued thereon. agent named herein to attative, if any, as to a without direct common change in the person the so notified by the upper son this application and this application and	to accept and follow instructions any action to be taken in the sunication between the U.S. as from whom instructions may andersigned. Ley(s) and/or agent(s) associated transact all business in the
Customer Number:	CUSTOMER N		
The appointed attorneys include:			
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Full name of sole or first	inventor William E. EISELE	·	
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